

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 3
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) CLUB FOR GROWTH ACTION		FEC IDENTIFICATION NUMBER ▼ C C00487470
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee Bask Digital Media, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 11 / 2016
Mailing Address 1953 San Elijo Ave. Ste. 2005		Amount 61000.00
City Cardiff-by-the-Sea	State CA	Zip Code 92007
Purpose of Expenditure digital ad placement, production costs	Category/ Type	Transaction ID : SE.5434 Date of Disbursement or Obligation MM / DD / YYYY 02 / 08 / 2016
Name of Federal Candidate RENEE JACISIN ELLMERS	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 486539.24		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Club for Growth		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 09 / 2016
Mailing Address 2001 L St., NW Suite 600		Amount 686.36
City Washington	State DC	Zip Code 20036
Purpose of Expenditure tv ad production costs (from advance Line 21)	Category/ Type	Transaction ID : SE.5432 Date of Disbursement or Obligation MM / DD / YYYY 02 / 09 / 2016
Name of Federal Candidate RENEE JACISIN ELLMERS	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 487225.60		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	61686.36
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Adam Rozansky

[Electronically Filed]

Date

MM / DD / YYYY
02 / 11 / 2016

Signature

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 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) CLUB FOR GROWTH ACTION		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00487470 </div>
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name of Payee Club for Growth		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 09 / 2016	
Mailing Address 2001 L St., NW Suite 600		Amount 143.87	
City Washington	State DC	Zip Code 20036	Transaction ID : SE.5433
Purpose of Expenditure press release (from advance Line 21)		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 02 / 09 / 2016
Name of Federal Candidate RENEE JACISIN ELLMERS		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Club for Growth		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 11 / 2016	
Mailing Address 2001 L St., NW Suite 600		Amount 381.86	
City Washington	State DC	Zip Code 20036	Transaction ID : SE.5435
Purpose of Expenditure digital ad production costs (from advance Line 21)		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 02 / 11 / 2016
Name of Federal Candidate RENEE JACISIN ELLMERS		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	525.73
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Red Sea, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 09 / 2016	
Mailing Address 4550 Montgomery Ave., North Tower Ste. 906		Amount 425539.24	
City Bethesda	State MD	Zip Code 20814	Transaction ID : SE.5430
Purpose of Expenditure tv ad air buy, production costs	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 02 / 05 / 2016	
Name of Federal Candidate RENEE JACISIN ELLMERS		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure	Category/ Type		
Name of Federal Candidate		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	425539.24
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	487751.33

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